

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

Application for a Class C Charter Certificate from
SchoolWheels Direct

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET
NUMBER 2019 - 166 - 7

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Denis Gallagher, Jr.Telephone: 407-271-0559Address: 4614 Rivers Avenue

Fax: _____

North Charleston, SC 29405

Other: _____

Email: _____

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class A/A Restricted☐ Request for Name Change on Certificate☐ Application - Class C Taxi☐ Request to Amend Scope of Authority☐ Application - Class C Charter☐ Request to Amend Tariff (rate increase, etc.)☒ Application - Class C Charter Bus☐ Request to Amend Passenger Limit☐ Application - Class C Non-Emergency☐ Request☐ Application - Class C Stretcher Van☐ Exhibit☐ Application - Class E Household Goods☐ Late-Filed Exhibit☐ Application - Class E Hazardous Waste☐ Letter☐ Application☐ Proposed Order☐ Request for Extension to Comply with Order☐ Publisher's Affidavit☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded☐ Reservation Letter☐ Request for Cancellation of Certificate☐ Response☐ Request for Suspension☐ Return to Petition☐ Request for Reinstatement☐ Other: _____

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

RECEIVED
MAY 17 2019
PSC SC
CLERK'S OFFICE

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210

Phone: (803) 896-5100 Fax: (803) 896-5199

2019-166-T
284689

APPLICATION FOR CLASS C CHARTER BUS CERTIFICATE

POSTED
5-20-19

Date: April 26, 2019

CLASS C - CHARTER BUS

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. SchoolWheels Direct, Inc.
Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)
4614 Rivers Avenue, North Charleston, SC 29405
Street Address of Applicant
Mailing Address of Applicant (if different from street address)
854-999-3198 854-999-3198
Phone Fax
dgallagher_jr@ridesta.com
Email Address

2. If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach South Carolina Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

- ☐ Individual Owner/Sole Proprietorship
☐ Partnership - List names and addresses of all person having an interest in the business.
☒ Corporation - List names and addresses of two principal officers.

Denis Gallagher, Sr.- CEO 880 Island Park Drive, Suite 300, Daniel Island, SC 29492

Patrick Walker- CFO 3349 Highway 138, Building A Suite C, Wall, NJ 07719

DESCRIPTION OF EQUIPMENT

MAKE	YEAR & MODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
Internatio	2010 CE	4DRBUSKNXAB189517	29800	43
Internatio	2010 CE	4DRBUSKN9AB189525	29800	43
Internatio	2014 CE	4DRBUAANXEB486787	29800	66
Internatio	2014 CE	4DRBUAAN3EB486789	29800	66
Internatio	2014 CE	4DRBUAANXEB486790	29800	66
Internatio	2014 CE	4DRBUAAN1EB486791	29800	66
Internatio	2014 CE	4DRBUAAN3EB486792	29800	66
Internatio	2014 CE	4DRBUAAN5EB486793	29800	66
Internatio	2014 CE	4DRBUAAN7EB486794	29800	66
Internatio	2014 CE	4DRBUSKN1EB758552	29800	71
Internatio	2014 CE	4DRBUSKN3EB758567	29800	71
Internatio	2014 CE	4DRBUSKN9EB758573	29800	71
Internatio	2014 CE	4DRBUSKN8EB758600	29800	71
Internatio	2014 CE	4DRBUSKN5EB758604	29800	71
Internatio	2014 CE	4DRBUSKN8EB758631	29800	71

DESCRIPTION OF EQUIPMENT

MAKE	YEAR & MODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
Bluebird	2014 Vision	1BAKF CPA0EF298832	29800	66
Bluebird	2014 Vision	1BAKF CPA2EF298833	29800	66
Bluebird	2014 Vision	1BAKF CPA4EF298834	29800	66
Bluebird	2014 Vision	1BAKF CPA6EF298835	29800	66
Bluebird	2014 Vision	1BAKF CPA8EF298836	29800	66
International	2015 CE	4DRBUC8N2FB653310	29800	73
International	2015 CE	4DRBUC8N4FB653311	29800	73
International	2015 CE	4DRBUC8N6FB653312	29800	73
International	2015 CE	4DRBUC8N8FB653313	29800	73
International	2015 CE	4DRBUC8NXFB653314	29800	73
International	2015 CE	4DRBUC8N2FB669829	31000	78
International	2015 CE	4DRBUC8N9FB669830	31000	78
International	2015 CE	4DRBUC8N0FB669831	31000	78
International	2015 CE	4DRBUC8N1FB669840	31000	78
International	2019 CE	4DRBUC8NXKB073121	31000	78

DESCRIPTION OF EQUIPMENT

MAKE	YEAR & MODEL	VIN#	WEIGHT EMPTY	SEATING CAPACITY
Internatio	2019 CE	4DRBUC8N1KB073122	31000	78
Internatio	2019 CE	4DRBUC8N3KB073123	31000	78
Internatio	2019 CE	4DRBUC8N5KB073124	31000	78
Internatio	2019 CE	4DRBUC8N7KB073125	31000	78
Internatio	2019 CE	4DRBUC8N9KB073126	31000	78
Internatio	2019 CE	4DRBUC8N0KB073127	31000	78
Internatio	2019 CE	4DRBUC8N2KB073128	31000	78
Internatio	2019 CE	4DRBUC8N4KB073129	31000	78
Internatio	2019 CE	4DRBUC8N0KB073130	31000	78
Internatio	2019 CE	4DRBUC8N2KB073131	31000	78
Internatio	2019 CE	4DRBUC8N4KB073132	31000	78

INSURANCE QUOTE

This form **MUST BE COMPLETED.**

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE.

The following insurance quote is for:

SchoolWheels Direct

Name of Applicant

4614 Rivers Avenue, North Charleston, SC 29405

Address of Applicant

Amount of Premium:

Limits Quoted: (See Below)

Liability Insurance \$ 68,183.00

Limits \$5,000,000

The above quoted premium is for a term of 12 months.

Minimum Limits - Intrastate Only:

16 or More Passengers* \$ 25,000/300,000/25,000

* Passengers = Number of seatbelts in the vehicle,
including the driver's seatbelt

National Interstate

Name of Insurance Company

3250 Interstate Drive, Richfield, OH 44286

Home Office Address of Company

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Exhibit Fit, Willing, and Able (FWA)

SchoolWheels Direct

Name of Applicant

1. Does Applicant have a Safety Rating from the U.S.D.O.T.?

- ☒ Yes ☐ No ☐ Pending (Submit when received.)

If Yes, indicate rating below and provide copy.

- ☒ Satisfactory ☐ Conditional ☐ Unsatisfactory

2. Have any of Applicant's drivers or vehicles been placed "out of service" by Transport Police safety officers in the past twelve (12) months?

- ☐ Yes ☒ No

3. Are there currently any outstanding judgments against the Applicant?

- ☐ Yes ☒ No

If Yes, list judgements here:

4. Is Applicant familiar with all insurance regulations and safety regulations governing charter bus carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these regulations?

- ☒ Yes ☐ No

5. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

- ☒ Yes ☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 EXECUTIVE CENTER DRIVE, SUITE 100
COLUMBIA, SOUTH CAROLINA 29210

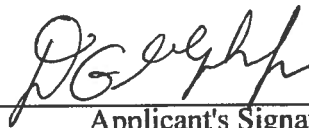
Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

- ☒ The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the e-mail address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc.gov to create a My DMS account.
- ☐ The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.



Applicant's Signature

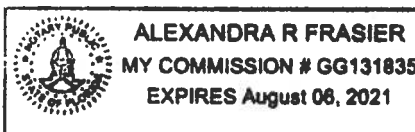
Vice President of Operations, Southeast US
Title of Applicant (e.g. President, Owner, etc.)

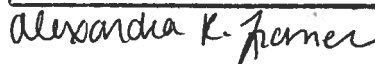
STATE OF SOUTH CAROLINA)
COUNTY OF _____)

SWORN TO BEFORE ME
This 9th day of May, 2019

Notary Public

Commission Expires _____





May 9th, 2019

To whom it may concern-

The enclosed is an updated application with pertinent insurance information, based on feedback given by the initial reviewer in the Regulatory Office.

Thanks,

Denis Gallagher, Jr

RECEIVED

MAY 14 2019

PSC SC
CLERK'S OFFICE

South Carolina Secretary of State Mark Hammond

Business Entities Online

File, Search, and Retrieve Documents Electronically

SCHOOLWHEELS DIRECT, INC.

Corporate Information

Entity Type: Corporation

Status: Good Standing

Domestic/Foreign: Foreign

**Incorporated Delaware
State:**

Important Dates

Effective Date 07/22/2014

:

**Expiration N/A
Date:**

**Term End N/A
Date:**

**Dissolved N/A
Date:**

Registered Agent

Agent: COGENCY GLOBAL INC.

Address: 2 OFFICE PARK COURT SUITE 103
COLUMBIA, South Carolina 29223

Official Documents On File

Filing Type	Filing Date
Notice of Change of Registered Office or Registered Agent or Both of a Foreign Corporation	10/12/2017
Amendment	08/26/2014
Authority	07/22/2014

For filing questions please contact us at 803-734-2158

Copyright © 2019 State of South Carolina